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Country programme document

Gabon

Summary

The country programme document (CPD) for Gabon is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of $4,270,000 from regular resources, subject to the availability of funds, and $6,100,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2018 to 2022.

In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on the draft CPD that was shared 12 weeks before the second regular session of 2017.

* E/ICEF/2017/14.

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Programme rationale

1. Gabon is an upper-middle-income country with abundant natural resources situated in central Africa. The country's economy has grown rapidly in the last decade, fuelled chiefly by the production of oil (which accounts for 80 per cent of exports, 45 per cent of gross domestic product (GDP) and 60 per cent of fiscal revenues)[1] and manganese. There is a significant discrepancy between the country's performance in terms of human development (it had a Human Development Index score of 0.697 in 2017, placing it 109th out of 188 countries)[2] and its economic potential (it is ranked 61st in terms of per capita income).

2. The 2018-2022 country programme is aligned with the Emerging Gabon Strategic Plan *(Plan Stratégique Gabon Émergent* (PSGE)) 2016-2021 and the Government's equal opportunities policy. Economic growth has slowed considerably, from 6.3 per cent in 2010 to 2.9 per cent in 2016, in light of falling oil revenues. The macroeconomic outlook suggests that Gabon may require assistance from the International Monetary Fund as the Government looks to rein in public expenditure, especially on social services and public infrastructures. The country's debt burden continues to rise (31 per cent of GDP in 2016), and poses greater challenges on investing for present and future generations.

3. Gabon has an estimated population of 1.8 million (2016) living within a surface area of 268,000 square kilometres, with forests covering 85 per cent of its territory. It has a particularly young population, with approximately 4 in 10 (43 per cent) Gabonese citizens under the age of 18 years and children under age 5 years accounting for 14 per cent of the population.

4. Immigration (mostly from South to South) has impacted the sex ratio, which stands at 48.4 per cent female to 51.6 per cent male. Migrants and their children make up approximately one fifth of the population. Migrants have no access to health insurance and other social safety nets provided by the Government. Gabon has yet to ratify several migrant rights instruments, including the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families, and the Protocol against the Smuggling of Migrants by Land, Sea and Air.

5. Gabon has one of the highest urbanization rates in Africa, with close to 9 in 10 (87 per cent) of its citizens now living in urban areas (16 per cent in 1960). This trend poses a number of challenges, including rising urban poverty, limited access to basic social facilities and services in suburban areas, and growing intra-urban inequalities. One of the lessons learned from the previous cycle is the need to consider poor and disadvantaged urban areas in strategic decision-making, modelling interventions and implementing with innovation for the most deprived populations. However, data on this issue remain sparse.

6. The country's multi-ethnic population includes indigenous peoples whose way of life is closely intertwined with the forest. Despite its small size,[3] this remains one of the most disadvantaged population groups in terms of income and access to basic social facilities and services (including civil registration, which is vital for access to existing social protection services). A 2011 World Bank study[4] found that 70 per cent of indigenous people live in poverty – twice the level among the rest of the population (33 per cent) – and that

[1] World Bank, Gabon Economic Update: *Protecting the Poor Despite Slower Growth*, December 2015.
[2] United Nations Development Programme, Human Development Report 2016.
[3] Between 7,000 and 20,000 according to the International Work Group for Indigenous Affairs, *The Indigenous World 2014, pp. 448-452.*
[4] World Bank, Gabon Country Brief No 5. Indigenous People, March 2011: Census-based profile of the Pygmies in Gabon.

indigenous children are 18 times less likely to enrol in secondary education than children from other groups (4.4 per cent vs. 80 per cent).

7. A 2013 report[5] on poverty suggests that around 30 per cent of the population is vulnerable and that the social situation has deteriorated in terms of access to basic social services (health, drinking water and electricity) in 60 per cent of provinces. Although 93 per cent of households have access to an improved water source, just 42 per cent have access to an improved sanitation facility. The coverage of water and sanitation facilities in health facilities and schools remains weak and is far from meeting adequate standards. The 2016 Service Availability and Readiness Assessment survey *(Évaluation de la disponibilité et de l'état de préparation des services)* found that only 54 per cent of health centres have an improved water source and only 71 per cent have sanitation facilities. The limited coverage of water and sanitation in institutions is driven by poor prioritization of these services in policies and budgets, and by a lack of maintenance skills and resources.

8. The 2014 Multiple Overlapping Deprivation Analysis for Children[6] shows that an estimated 80 per cent of children experience at least one form of deprivation across the areas of health, education, drinking water and sanitation, food, housing and protection. Health, sanitation and nutrition are the most common sources of deprivation, fuelled chiefly by inadequate service provision and cultural barriers. Other drivers of inequity and deprivation include the high cost of living in Gabon (as evidenced by a government programme to address this problem (*Programme de Lutte Contre la Vie Chère*) and the fact that one quarter of the population is unemployed.

9. In 2015, the estimated nationwide under-five mortality rate stood at 51 per 1,000 live births, with a higher rate among boys than girls (55 and 46 per 1,000 live births respectively). Neonatal mortality accounts for 46 per cent of deaths of children under 5 years of age, with malaria and diarrhoea the leading causes of disease and death among the same age group.

10. Progress towards full immunization coverage remains inadequate, despite an increase from 17 per cent in 2000 to 32 per cent in 2012 according to the Gabon Demographic and Health Survey (DHS). Moreover, recent data show a downward trend in immunization in the last five years, with measles vaccination coverage dipping from 74 per cent in 2012 to 68 per cent in 2016. The main barriers to immunization are as follows: (a) only a small number of health centres offer routine immunization services; (b) frequent stock-outs of vaccines; (c) a dysfunctional routine immunization system; and (d) not enough is done to communicate about immunization and keep the community engaged beyond outreach campaigns.

11. In nutrition, Gabon attained Millennium Development Goal 1 (eradicate extreme poverty and hunger). Despite relatively low stunting and wasting rates (18 per cent and 3 per cent respectively), the country is still beset by a range of problems. The exclusive breastfeeding rate for children under age 6 six months (6 per cent) is among the lowest in the world, compared with an average of 40 per cent across sub-Saharan Africa. Gabon also has a high childhood obesity rate (8 per cent), which is double the average in sub-Saharan Africa (4 per cent). This poor performance is the result of several factors: (a) a shortage of curative and preventive nutrition services; (b) vitamin A is not included in routine activities; and (c) lack of national guidelines, even though Gabon joined the Scaling Up Nutrition Movement in 2017.

[5] McKinsey, *Étude sur l'état de la pauvreté au Gabon*, 2013.
[6] www.unicef-irc.org/MODA.

12. Efforts to strengthen child protection systems are beset by a series of challenges, including weaknesses in the normative framework, poor resource allocation and the absence of coordination between sectors. Access to protection services is hampered by prevailing social norms and insufficient capacities in technical departments (central and decentralized government bodies, civil registration, law enforcement and justice). Migrant children remain highly susceptible to cross-border trafficking and smuggling by criminal networks. Between 2004 and 2016,[7] government services in collaboration with UNICEF have rescued around 850 children from exploitation, trafficking and smuggling. However, the full magnitude of unaccompanied children and adolescents at risk and/or victims of trafficking and smuggling remain largely unknown in the absence of comprehensive data and information. The situation continues to worsen because laws against child trafficking and exploitation are not fully and efficiently enforced.[8]

13. Adolescents account for 21 per cent of the country's population. Primary school enrolment is high, with a gross enrolment ratio of 140 per cent for girls and 144 per cent for boys. At 36 per cent, the repetition rate at primary level is among the highest in the world, and the resulting dropout rate explains why the secondary enrolment rate is just 57 per cent for girls and 48 per cent of boys. Moreover, teenage pregnancy and motherhood rates are particularly high; the adolescent birth rate is estimated at 115 live births per 1,000 girls aged 15-19 years for the period 2009-2014; nearly 3 births in 10 are to adolescent girls. The HIV prevalence rate among adolescent girls stands at 1.3 per cent, twice as high as among teenage boys. Similarly, numerous cases of sexual violence are recorded in school settings. A 2015 United Nations Population Fund (UNFPA) study found that in the age group 15-19 years, girls were disproportionately more likely to be victims of sexual and physical violence than boys (10 per cent and 4 per cent respectively).

14. In the last eight years, the Government of Gabon has made a sustained effort to expand health insurance and other social protection services. As a result, more than half of the population is now covered, including people with low incomes. Partners, including UNICEF, which has a comparative advantage on this front, have also made significant efforts to strengthen the normative framework and ensure that recipients are selected on a fairer basis. The social protection system nevertheless remains beset by a number of bottlenecks, including: (a) the absence of up-to-date statistics and weaknesses in the monitoring system in general; (b) an ineffective beneficiary targeting system; (c) poor coordination between stakeholders; and (d) a shortage of funds.

15. One of the lessons learned from the past country programme is a need to strengthen accountability at community level for greater investments in basic social services, and foster effective support to the Government, under the "Delivering as one" framework, in order to influence policy and domestic resource utilization in favour of equitable progress. Moreover, the country is finding it hard to mobilize external additional resources. This implies that a change in approach is needed, in order to: (a) generate compelling evidence to support strategic advocacy and policy dialogue; (b) develop low-cost, high-impact models to drive more efficient domestic resource utilization; (c) enhance the normative framework; (d) strengthen national systems and capacities; (e) leverage domestic resources and private partnerships; (f) accelerate South-South cooperation (particularly in an effort to

[7] Shelter for Socially Vulnerable Children (*Centre d'Accueil pour Enfants en Difficulté Sociale* (CAPEDS)), 2016, CAPEDS administrative data, Ministère du Développement Social et Familial, de la Prévoyance Sociale et de la Solidarité Nationale, Libreville..

[8] Ngozi Ezeilo, J., United Nations Special Rapporteur on Human Trafficking, End of mission statement, United Nations Human Rights Council, Geneva, June 2013.

deliver sustainable solutions for international migration and child trafficking); and (g) strengthen capacity for humanitarian actions and resilience in the wider context of the epidemic diseases affecting the sub-region.

Programme priorities and partnerships

16. The 2018-2022 country programme is aligned with the PSGE 2016-2021, the Government programme for equal opportunity, the Government's 10-year plan for gender equality and gender equality policy, the Sustainable Development Goals and the African Union Agenda 2063, and is in the spirit of the draft UNICEF Strategic Plan 2018-2021. UNICEF will support the Government to accelerate the pace of progress on children's rights, especially for disadvantaged indigenous children, child migrants and children living in rural and poor urban settings.

17. The country programme will also contribute to effectively addressing the final observations of the Committee on the Rights of the Child on Gabon's second periodic report (2016), and in particular the observations concerning migrant rights, the rights of adolescent girls and boys to participation, and a more inclusive social protection system. It will significantly contribute to two outcomes of the United Nations Development Assistance Framework (UNDAF) for 2018-2022: (a) strengthening the good governance and the statistical system; and (b) inclusive human development through access to and utilization of basic social services including health and nutrition, HIV and AIDS prevention and treatment services, education, water, sanitation and hygiene (WASH) and social protection for all.

18. In the context of an upper middle-income country, the programme will have a national scope for all legislative and policy support to the Government, and a limited geographical focus on a smaller number of health districts (8 of 52) with a higher vulnerability profile for modelling cross-sectoral interventions in health, HIV and AIDS, protection and sanitation. At the national level, UNICEF will seek to build on lessons learned and its comparative advantages by: (a) influencing priorities and budgets through continuous support to child-sensitive and equitable sector-specific policies and budgets; (b) strengthening coordination mechanisms for policy implementation and law enforcement; (c) promoting standards for quality services; (d) boosting social accountability by fostering alliances between communities and institutions; (e) strengthening capacities and systems in order to deliver high-quality services to the most vulnerable people; and (f) generating better evidence on the situation of children and on what works. Advocacy efforts at all levels, as well as policy support and investment cases to inform budget allocation, will incorporate the rights and needs of the most disadvantaged groups, including indigenous peoples, migrants and their children, and people living with disabilities. In each programme component, particular emphasis will be placed on promoting innovation and strengthening systems for the production, analysis, dissemination and utilization of high-quality data. Although Gabon has experienced few natural disasters, efforts will be made to build capacities for humanitarian situation preparedness and response, and resilience programming through a strategic partnership with the Gabonese Red Cross.

19. At the implementation level, the country programme will harness strategic alliances for modelling programmatic and technological innovations, and propose high-impact intervention approaches to inform sector-specific policies and drive more effective domestic resource allocation in favour of the most vulnerable people (including those living in disadvantaged urban areas). The programme will also engage in behaviour change

communication and seek to strengthen community accountability on social matters in order to support these operational-level interventions.

20. On gender equality, the programme will support gender-sensitive adolescent health priorities in an effort to decrease teenage pregnancy, limit the impact of HIV on women, reduce school-based violence and increase the lower secondary completion rate for girls.

21. The programme will be implemented through five components, each with a specific outcome: (a) child survival and development; (b) child protection; (c) adolescents; (d) social inclusion; and (e) programme effectiveness.

Child survival and development

22. This programme component includes the following sub-components: maternal and child health (MCH); nutrition; prevention of mother-to-child transmission of HIV; and WASH. In partnership with the Government, the United Nations system and other partners, the child survival and development programme component will contribute to the UNDAF outcome on inclusive human development and to attainment of the national priority on improving population health and well-being (including for the most disadvantaged people) as enshrined in the National Health Development Plan *(Plan National de Développement Sanitaire (PNDS))* 2017-2021.

23. UNICEF will seek to achieve these aims by: (a) supporting the development or revision of sector-specific policies on health, HIV/AIDS, nutrition and WASH in an effort to improve the normative framework; (b) strengthening the coordination mechanisms and the health information system, including the DHS, to produce stronger national health statistics; (c) helping to decentralize the national health strategy (improving administrative and service delivery effectiveness) through applying an equity-based programming approach[9] in eight health districts, some from poor urban settings; (d) carrying out sustained advocacy and forging public-private alliances in an effort to bring water and sanitation facilities to more health centres and schools; (e) promoting community health, infant and young child nutrition and hygiene; (f) supporting in-situ training for health professionals; and (g) helping to improve the vaccine and antiretroviral treatment (ART) supply and logistics management information system. Finally, the programme will seek to strengthen emergency preparedness and response capacities, taking into account the frequent epidemics affecting the subregion.

24. In Gabon, the community health system is weak and only 5 per cent of total public health expenditure is devoted to preventive care. Against this backdrop, UNICEF will focus its efforts on working with other partners to ensure that more domestic resources are allocated to preventive community health care systems, and on promotion of health interventions with better outcomes for the most disadvantaged people. The programme will combine policy-level support with high-impact implementation models in disadvantaged areas. This will help to track the impact and support fine-tuning of policies.

25. UNICEF will reinforce partnerships with the World Health Organization (WHO), UNFPA and the Food and Agriculture Organization of the United Nations (FAO) and will work with UNDAF outcome groups, civil society (including the Gabonese Red Cross) and subregional organizations such as the Economic Community of Central African States (ECCAS).

[9] Monitoring Results for Equity (MoRES) approach.

Child protection

26. The child protection programme is aligned to the Child Code (*Code de l'Enfant*) and the response to the observations made by the Committee on the Rights of the Child in 2016 (including continuing harmonization work and strengthening the protection system). UNICEF, through policy advice, advocacy, evidence generation and technical and financial assistance, will help to strengthen the protection system, with a particular emphasis on: (a) improving the normative framework and strengthening intrasectoral coordination; (b) strengthening institutional capacities and stakeholder competencies (law enforcement officers, judges, social workers, families); (c) developing and implementing standards for high-quality services to address violence, abuse, exploitation and harmful practices; and (d) promoting child-friendly social norms in families, communities and institutions in order to better prevent abuse, exploitation, violence and discrimination. The programme's success will depend on adequate investment, at the central level, in government departments, local authorities, supervisory institutions and Parliament to ensure that all stakeholders across the protection chain take ownership of, internalize and apply laws, norms and standards.

27. In Gabon, certain population groups, including migrant workers and their children, indigenous peoples, persons living with disabilities and adolescent girls subjected to sexual and physical violence, suffer from discrimination and exclusion. The programme will therefore prioritize interventions that focus on policy, legal and institutional measures to better protect them, and ensure that they have increased and more equitable access to basic social services and social protection. Finally, the programme will place particular emphasis on mobilizing and building the capacities of adolescent boys and girls to help them to become agents/drivers of change in child protection.

28. The programme will work closely with various government entities including the ministries in charge of social development, justice, interior, labour, education and health, as well as civil society organizations (CSOs), the International Organization for Migration (IOM) and ECCAS.

Adolescents

29. The adolescents programme will work with UNFPA and education partners to revitalize gender-sensitive sexual and reproductive health (SRH) for adolescents, in an effort to reduce teenage pregnancy, limit the impact of HIV on women, reduce school-based violence, reduce the dropout rate and increase the lower secondary completion rate among girls. UNICEF will focus its efforts on: (a) preventing HIV/AIDS among adolescent boys and girls; (b) preventing school drop-outs; (c) promoting secondary school enrolment among adolescents; (d) reducing teenage pregnancy; (e) preventing and responding to sexual violence; and (f) building the capacities of adolescents so they are better able to participate in policy development and decisions affecting their lives at community level. Prevention efforts will specifically target vulnerabilities affecting adolescent girls, and will seek to empower them by harnessing gender-based social norms that promote gender equality and enhance girls' rights.

30. The programme will build on existing initiatives from the previous cycle, including support to scale up and sustain the school health clubs initiative.

31. The programme will work with the other components to revise and develop adolescent capacities in health, education and protection, in partnership with the Government and civil society. It will also give adolescents an opportunity to make their

views heard in policymaking debates through advocacy and innovative technologies (including the U-Report platform).

32. The programme's main partners will be the ministries in charge of health and education, UNFPA, WHO, United Nations Education, Science and Culture Organization (UNESCO), the United Nations Entity for Gender Equality and the Empowerment of Women (UN- Women), ECCAS and CSOs.

Social inclusion

33. The main aim of this component is to support the Government to implement the Social Protection Code (*Code de Protection Sociale*) and to improve the effectiveness and efficiency of the state budget, particularly in social sectors. On the strength of its comparative advantage, UNICEF has been designated as the United Nations lead agency on social protection in Gabon. In this role, it will promote greater consistency in sector-specific policymaking and ensure that budget processes, including budget formulation, allocation and spending, are more effective at reducing inequalities and exclusion. Through this support, the component will ensure that addressing child poverty remains high on the development agenda in Gabon.

34. In light of the Government's priorities and the lessons learned from the previous cycle, UNICEF will focus its support at the following areas: (a) helping to generate data and evidence to improve the selection of beneficiaries of social protection services, to gain insight into the profile of child poverty and social exclusion and to reflect child-related priorities in budget laws and other expenditure frameworks; (b) strengthening national systems and capacities for the design and implementation of equitable and inclusive education, health and protection policies and services; (c) supporting the creation of a social protection regulatory body; and (d) assisting in the design and implementation of social safety nets for the most vulnerable people. The programme's success will depend on: (a) increased public investment in social sectors; (b) better income distribution for the most vulnerable people; and (c) improved access to decent work for households.

35. UNICEF will build close ties with key partners such as the World Bank, FAO, the European Union, the African Development Bank, the French Development Agency and the United Nations system.

Programme effectiveness

36. The programme effectiveness component will cover: (a) programme coordination; (b) strategic communication and advocacy; and (c) monitoring and evaluation (M&E). It aims to ensure that programme interventions are designed, coordinated, managed and supported effectively, in line with programme quality standards, and that the expected results are attained. The component will include a specific M&E output to address the need to build national evaluation capacities and strengthen sector-specific statistical systems, and the capacity of the national institute of statistics. Communication for development (C4D) interventions will be mainstreamed through the child survival, protection and adolescent programmes, either through the promotion of essential family practices or through social change and the promotion of child-friendly social norms. These specific interventions will be used to support the development of a national C4D strategy.

Summary budget table

Programme component	*(In thousands of United States dollars)*		
	Regular resources	*Other resources*	*Total*
Child survival and development	1 068	1 810	2 878
Child protection	854	1 508	2 362
Adolescents	640	1 207	1 847
Social inclusion	854	905	1 759
Programme effectiveness	854	670	1 524
Total	**4 270**	**6 100**	**10 370**

Programme and risk management

37. This country programme document outlines the UNICEF contribution to achieving national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. The content of this document is inspired primarily by the UNDAF 2018-2022. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.

38. The coordination unit overseeing implementation of the programme is the General Directorate of Forecasting of the Ministry of the Economy, Programming and Sustainable Development.

39. The main risks identified during the preparation of this programme are: (a) decreasing public resources allocated to children; (b) a failure to mobilize sufficient additional external resources; and (c) humanitarian crises caused by political instability or epidemics. The country programme will mitigate these risks by: (a) strengthening social accountability of key right holders at community and service provision levels, in order to leverage and influence the setting of priorities and the utilization of domestic resources ; (b) forging a closer partnership with the private sector by putting increased focus on leveraging corporate social responsibility; (c) mainstreaming resilience, preparedness and response to humanitarian crisis in annual workplans; (d) doing more to harness national opportunities such as the Government's Programme for Fair Chances.

Monitoring and evaluation

40. The integrated monitoring, evaluation and research plan and the costed evaluation plan will serve as basis for: (a) generating data and evidence to measure progress against planned outputs and the contribution of UNICEF to outcomes; and (b) gaining prospective and actionable learning on what works, for whom, why and at what cost. In order to foster the evaluation culture and to improve the programme's focus and effectiveness, four major evaluations will be conducted in tandem with relevant partners: (a) formative evaluation of child protection system (2018); (b) joint evaluation of the national HIV/AIDS prevention

and response strategy for adolescents (2019); (c) evaluation of social protection system performance in Gabon (2020); and (d) evaluation of the health sector capacity-building strategy (2021). UNICEF-supported initiatives align with the UNDAF monitoring and evaluation framework.

41. In response to persistent knowledge gaps in some critical areas, and to support efficient policies and programmes, UNICEF will forge partnerships to engage in selected studies and to generate more robust evidence on intra-urban inequalities, child poverty in urban settings, vulnerabilities affecting indigenous peoples and children with disability. In addition, UNICEF will continue to support evidence-based advocacy and programming through investing on secondary data analysis from existing surveys and census databases (2013 National Housing and Population Census, Gabon Poverty Survey (*Enquête Gabonaise sur la Pauvreté* (EGEP) 2017 and DHS 2018-2019.

42. The programme will also continue to support administrative data production efforts, including ongoing assistance to update child protection indicators and to produce education statistical yearbooks and national health accounts. Together, these efforts will help to strengthen national statistical capacities.

43. Through its internal monitoring mechanisms including programme mid-year and annual reviews, the UNICEF performance management system (inSight) and the decentralized monitoring system in the selected health districts, the programme will report regularly on programme performance (inputs and outputs) and reduction of bottlenecks.

Annex

Results and resources framework

Gabon – UNICEF country programme of cooperation, 2018-2022

Relevant articles of the Convention on the Rights of the Child: 2,4, 6, 7-8, 9-11, 12-13, 15-17, 19, 23-24, 25, 26-30, 32-36, 37, 39-40, 42, 44-45.

National priorities:

- PSGE 2016-2021 objectives on equal opportunities and the National Human Development Strategy
- National Health Development Plan 2017-2021 on improving public health and well-being, especially for the most disadvantaged groups

Sustainable Development Goals: 1, 2, 3, 4, 5, 6, 10, 16.

UNDAF outcomes involving UNICEF:

Outcome 1: National and local institutions are more democratic and respect human rights, the economy is governed transparently, effectively and accountably, and public policy is guided by a robust statistical system.
Outcome 2: All people, including the most vulnerable groups, use basic social services to improve their living conditions.

UNDAF outcome indicators measuring change that includes UNICEF contribution

- Number of universal periodic review recommendations implemented (Baseline: N/A; Target: N/A)
- Statistical system robustness index (Baseline: 0.4; Target: 0.6)
- Full immunization coverage rate (Baseline: 32 per cent; Target: 60 per cent)
- Exclusive breastfeeding rate (Baseline: 6 per cent; Target: 10 per cent)
- Percentage of people living with HIV (PLHIV) (children and adults) with access to effective ART in line with attainment of the 90-90-90 targets (Baseline: 60 per cent; Target: 90 per cent)
- Percentage of people benefiting from a social protection system (Baseline: 62 per cent; Target: 75 per cent)
- Percentage of people using improved basic sanitation facilities (Baseline: 41 per cent; Target: 50 per cent)
- Gross secondary enrolment ratio (Baseline: 57 per cent (girls), 48 per cent (boys); Target: 62 per cent (girls), 55 per cent (boys))

Related draft UNICEF Strategic Plan, 2018-2021 Goal Areas:[1] 1-5

[1] The final version of UNICEF Strategic Plan 2018-2021 will be presented to the Executive Board for approval at its second regular session of 2017

UNICEF outcomes	*Key progress indicators, baselines (B) and targets (T)*[2]	*Means of verification*	*Indicative country programme outputs*	*Major partners, partnership frameworks*	*Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)*		
					RR	*OR*	*Total*
Programme component: Child survival and development							
1. By 2022, children and their mothers, including the most disadvantaged, access and use a minimum package of appropriate promotional, preventive and curative services to improve their survival and development, including in emergency situations.	1. Full immunization coverage rate B: 32% T: 60%	DHS III Enhanced Programme for Immunization report	1.1. Stakeholders are equipped with updated child survival-related policies and strategies, normative standards guiding health interventions. 1.2. Health-care facilities at the intermediate and peripheral levels have increased capacities to promote and provide integrated package of services in maternal and child Health, nutrition, HIV/AIDS and WASH, including in emergency situations. 1.3. People living in the target areas, especially the most disadvantaged communities, women and children have increased information, knowledge and motivations to adopt good practices in health, nutrition and WASH. 1.4. Communities, schools and health-care facilities have increased coverage in WASH infrastructures.	Ministry of Health, Ministry of Social Development, Planning and National Solidarity, Ministry of Energy and Environment WHO UNFPA UNAIDS FAO ECCAS Civil society	1 068	1 810	2 878
	2. Existence of policies, technical guides and a funding framework for nutrition and for the water and sanitation sector B: No T: Yes	Ministry of Health administrative reports					
	3. Percentage of PLHIV (children, adolescents and adults) with access to effective ART in line with attainment of the 90-90-90 targets B: N/A T: 90%	UNAIDS report					
	4. Exclusive breastfeeding rate, 0-5 months B: 6% (DHS 2012) T: 15% (DHS)	DHS					
Programme component: Child protection							
2. By 2022, the child protection system is better able to prevent and address violence, exploitation and discrimination through a normative framework,	1. The country has a national implementation plan for its national inclusive child protection policy B: 0 T: 1	Human Rights Council five-year report Council of Ministers final report	2.1. Children, including migrants and indigenous peoples, enjoy better services from an improved and a more functional child protection system. 2.2. Families, communities and	Ministry of Social Development, Planning and National Solidarity Ministry of Justice Ministry of Education	854	1 508	2 362

[2] If not otherwise stated, the reference year is 2016 for baselines and 2022 for targets

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)[2]	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (in thousands of United States dollars)		
					RR	OR	Total
protection services, and operational outreach workers at the institutional, community and family levels.	2. Percentage of indigenous children with a civil registration record B: N/A; T: To be determined	Study report	children are better informed about child protection mechanisms and standards, and adolescents in particular refer to them and are involved in strengthening the protection system. 2.3. Departmental, communal and provincial protection systems are better able to prevent abuse, exploitation and violence and offer psychosocial support services.	Civil society UNESCO			
	3. Number of annual reports based on government-produced violence, abuse and exploitation figures B: 1 T: 4	Publication of the National Protection Indicator Matrix					
Programme component: Adolescents							
3. Adolescents, especially the most vulnerable, access and use appropriate social services that contribute to their development, their rights and their participation.	1. Percentage of adolescents aged 15-24 years with comprehensive knowledge of HIV/AIDS (gender-disaggregated data) B: 36% of boys and 30% of girls (2016) T: 50% (boys and girls)	DHS III	3.1. Policies and mechanisms are in place to keep adolescents, especially the most vulnerable, in the education system 3.2. Adolescents have better access to appropriate promotional, preventive and curative services. 3.3. Adolescents, especially the most vulnerable, are better informed and have improved life skills and are involved in promoting their development and their rights.	Ministry of Education Ministry of Health Ministry of Youth WHO UNAIDS UNFPA Civil society ECCAS			
	2. Percentage of schools operating SRH and teenage pregnancy prevention programmes B: 0% (2017); T: 25% (2022)	Ministry of Education activity report					
	3. Teenage pregnancy rate B: 28% (2012); T: 20% (2022)	DHS III					
	4. Secondary completion rate (gender-disaggregated) B: 41% (girls), 51 % (boys) T: 60% (girls and boys)	Education for All Report (Ministry of Education)					
Programme component: Social inclusion							

UNICEF outcomes	*Key progress indicators, baselines (B) and targets (T)* [2]	*Means of verification*	*Indicative country programme outputs*	*Major partners, partnership frameworks*	*Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)*		
					RR	*OR*	*Total*
4. By 2022, socially excluded children have better access to and use of basic social protection services and their rights and needs are included in sector specific policies, strategies, the State budget, and social protection programmes.	1. Number of children covered by social protection programmes B: 442,000 (2016) T: 600,000 (2022)	National Health Insurance and Social Security Fund (*Caisse Nationale d'Assurance Maladie et de Garantie Sociale* CNAMGS)) report DHS III EGEP	4.1. National stakeholders are better able to implement integrated social protection programmes for the most vulnerable groups. 4.2. National and local public institutions are better able to develop and implement child-sensitive budgets. 4.3. National stakeholders are better able to analyse and use evidence to influence national and sector-specific policies in favour of children.	Ministry of Social Development, Planning and National Solidarity Ministry of Health Ministry of the Economy CNAMGS World Bank United Nations system	854	905	1 759
	2. Percentage of total State budget allocated to social sectors (education, health and social protection) B: N/A (2016) T: 20%	National education and health statistics					
	3. Percentage of people with health insurance: B: 62% (2016); T: 75% (2022)	CNAMGS report DHS III EGEP					
Programme component: Programme effectiveness							
5. Country programmes are designed, coordinated, managed and supported effectively, in line with programme quality standards, and the expected outcomes are attained.	1. Percentage of evaluation recommendations implemented within one year B: 0% T: 50%	Global Evaluation and Research Oversight System	5.1. UNICEF staff and partners have the tools, guidance and resources they need to design, plan and implement programmes and monitor them effectively. 5.2. UNICEF staff and partners have the tools, guidance and resources they need to communicate effectively and influence social norms around children's rights among stakeholders.	Ministry of the Economy Ministry of Health Media outlets CSOs	854	670	1 524
	2. Office year-end performance index B: 0.8 T: 0.9	Scorecard					

UNICEF outcomes	*Key progress indicators, baselines (B) and targets (T)* [2]	*Means of verification*	*Indicative country programme outputs*	*Major partners, partnership frameworks*	*Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)*		
					RR	*OR*	*Total*
Total resources					**4 270**	**6 100**	**10 370**